HAWAII STATE ETHICS COMMISSION DISCLOSURE OF FINANCIAL INTERESTS (SHORT FORM)

NAME (Last, First, Middle)	STATE POSITION HELD: (Dept/Div or Board/Commission)	
	Department of Hawaiian Home Lands	
Kane, Micah Alika	TERM OF OFFICE (Begin/End):	
	` 01/02/03 / 12/31/06	

Check either number 1 or 2. If you check number 2, provide the relevant information.

1. I HAVE NO CHANGES TO REPORT SINCE MY LAST FILING

2. I HAVE THE FOLLOWING CHANGES TO REPORT SINCE MY LAST FILING.

FOR EACH ITEM, DISCLOSE ADDITIONS, DELETIONS, OR CHANGES IN INTERESTS OF FILER,

SPOUSE AND DEPENDENT CHILDREN. USE THE ABBREVIATIONS: "F" for filer, "SP" for spouse, "DC" for dependent children, and "JT" for joint interests of the spouse and filer. Use "A" for any additions in interests, "D" for any deletions, and "C" for any other changes.

F, SP, DC, JT	A, D, C	ITEM # 1
SP	С	F .
F	A	Add Hawaii Republican Party, 725 Kapiolani Blvd., C-105, Honolulu, HI 96813 Amount: B; Services Rendered: Employment
F, SP, DC, JT	A, D, C	ITEM # ²
SP	С	Change VALUE OR NO. OF SHARES: From 12% to 14%
F, SP, DC, JT	A, D, C	ITEM# ²
SP	A	Add BUSINESS NAME AND ADDRESS: Solera Industries, LLC 700 Richards Street, #1210, Honolulu, HI 96813 NATURE OF BUSINESS: General Services NATURE OF INTEREST: Member VALUE OR NO. OF SHARES: 40%
F, SP, DC, JT JT	A, D, C A	Add NAME OF CREDITOR AND ADDRESS: Bank of Hawaii 111 S. King Street, Honolulu, HI 96813 ORIGINAL AMOUNT OWED: E AMOUNT OUTSTANDING: E

Page 2 of 3

F, SP, DC, JT F	A, D, C A	Add NAME AND ADDRESS OF BUSINESS: Education Ist TITLE HELD: Board of Director TERM OF OFFICE: 2004 to present COMPENSATION: none
<u>F, SP, DC, JT</u> JT	A, D, C C	ITEM # 6 Change VALUE: From "H" TO "I"
F, SP, DC, JT	A, D, C	ITEM#
F, SP, DC, JT	<u>A, D, C</u>	ITEM#
F, SP, DC, JT	<u>A, D, C</u>	MAY 31 P2 104 ETHICS COMMISSI
F, SP, DC, JT	A, D, C	ITEM#

CERTIFICATION: I have reviewed my previous Disclosure of Financial Interests Statements filed with the Hawaii State Ethics Commission and all succeeding amendments. I hereby certify that the above is a true, correct, and complete statement to the best of my knowledge and belief of my currently reportable financial interests and that there have been no other changes in my reportable financial interests since my prior reports were filed. If I have a spouse and/or dependent children, I also hereby certify that I have included their interests on this form to the best of my knowledge and belief. I understand that it is a violation of State law, chapter 84, HRS, if information is not disclosed as required by chapter 84, HRS. I further understand that there are statutory penalties for accompliance.

SIGNATURE (Note: This filing is not valid without a signature.)

DATE

FORM D-103A (Revised: 12/02)